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Bib Data Sheet

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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 09/756,398 01/08/2001 PAT 6,835,823 which is a DIV of 09/133,119 08/12/1998 PAT 6,277,969  
 which is a DIV of 08/570,674 12/11/1995 ABN  
 which is a CIP of 08/324,799 10/18/1994 PAT 5,698,195  
 which is a CIP of 08/192,102 02/04/1994 PAT 5,656,272  
 and is a CIP of 08/192,861 02/04/1994 PAT 5,919,452  
 and is a CIP of 08/192,093 02/04/1994 PAT 6,284,471  
 which is a CIP of 08/010,406 01/29/1993 ABN  
 and is a CIP of 08/013,413 02/02/1993 ABN  
 which is a CIP of 07/943,852 09/11/1992 ABN  
 which is a CIP of 07/853,606 03/18/1992 ABN  
 which is a CIP of 07/670,827 03/18/1991 ABN

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***
**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 12/12/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 37	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

21005

**TITLE**

Methods of treating neurodegenerative inflammation with anti-tnf alpha antibodies

<b>FILING FEE RECEIVED</b> 1800	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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